

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|-------|
| FEE DETERMINATION | RR | 1029 | 3/6/6 |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | | | |

Best Available Copy

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 (Through numeral) Canceled A Appeal
 - Restricted O Objected

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

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